

# EXHIBIT A

<p>1 UNITED STATES DISTRICT COURT</p> <p>2 DISTRICT OF MASSACHUSETTS</p> <p>3 -----x</p> <p>4 In re: NEURONTIN MARKETING, SALES</p> <p>5 PRACTICES AND PRODUCTS LIABILITY</p> <p>6 LITIGATION</p> <p>7 -----x</p> <p>8 THIS DOCUMENT RELATES TO: MDL Docket No. 1629</p> <p>9 PRODUCTS LIABILITY LITIGATION NO. 04-10981</p> <p>10 -----x</p> <p>11 SUPREME COURT OF THE STATE OF NEW YORK</p> <p>12 COUNTY OF NEW YORK</p> <p>13 -----x</p> <p>14 IN RE: NEW YORK NEURONTIN</p> <p>15 PRODUCTS LIABILITY LITIGATION</p> <p>16 -----x</p> <p>17 THIS DOCUMENT APPLIES TO:</p> <p>18 ALL CASES</p> <p>19 -----x</p> <p>20 The Videotaped deposition of CYNTHIA MCCORMICK,</p> <p>21 M.D., was held on Thursday, February 14, 2008, commencing at</p> <p>22 9:04 a.m., at the law offices of Shook, Hardy &amp; Bacon, 600</p> <p>23 Fourteenth Street, Northwest, Washington, D.C., before Karen</p> <p>24 Geddes, CSR, and notary public.</p> <p>25 REPORTED BY: Karen Geddes, CSR</p>	<p>3</p> <p>1 (APPEARANCES continued.)</p> <p>2</p> <p>3 ON BEHALF OF THE DEFENDANTS, PFIZER:</p> <p>4 SCOTT W. SAYLER, ESQUIRE</p> <p>5 VINCENT E. GUNTER, ESQUIRE</p> <p>6 Shook, Hardy &amp; Bacon, LLP</p> <p>7 2555 Grand Blvd.</p> <p>8 Kansas City, Missouri 64108</p> <p>9 (816)474-6550 Phone</p> <p>10 (816)421-5547 Fax</p> <p>11</p> <p>12 ALSO PRESENT:</p> <p>13</p> <p>14 Mr. Keith Altman</p> <p>15 Mr. Vijay V. Bondada</p> <p>16 Mr. Ari Kresch</p> <p>17 Mr. Hans Jorgensen, The Videographer</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>
<p>2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 ON BEHALF OF THE PLAINTIFFS:</p> <p>4 W. MARK LANIER, ESQUIRE</p> <p>5 ROBERT LEONE, ESQUIRE</p> <p>6 KENNETH SOH, ESQUIRE</p> <p>7 The Lanier Law Firm, P.C.</p> <p>8 6810 FM 1960 West</p> <p>9 Houston, Texas 77069</p> <p>10 (713)659-5200 Phone</p> <p>11 (713)659-2204 Fax</p> <p>12</p> <p>13 ON BEHALF OF THE PRODUCT LIABILITY PLAINTIFFS:</p> <p>14 ANDREW G. FINKELSTEIN, ESQUIRE</p> <p>15 Finkelstein &amp; Partners</p> <p>16 436 Robinson Avenue</p> <p>17 Newburgh, NY 12550</p> <p>18 (800)634-1212 ext. 9451</p> <p>19 (845)562-3492 Fax</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25 (APPEARANCES continued on next page.)</p>	<p>4</p> <p>1 PROCEEDINGS</p> <p>2 THE VIDEOGRAPHER: On the record at</p> <p>3 9:04 a.m., Thursday, February 14, 2008. This is the</p> <p>4 videotaped deposition of Dr. Cynthia McCormick taken</p> <p>5 by Mark Lanier, Esquire, with offices at 6810 Farm</p> <p>6 Market 1960 West, in Houston, Texas.</p> <p>7 The caption in the case is in re:</p> <p>8 Neurontin Marketing Sales Practices and Products</p> <p>9 Liability Litigation MDL, Docket Number 1629 in the</p> <p>10 United States District Court, District of</p> <p>11 Massachusetts.</p> <p>12 The deposition is being conducted in the</p> <p>13 offices of Shook Hardy &amp; Bacon located at 600</p> <p>14 Fourteenth Street, N.W., Washington, D.C.</p> <p>15 I'm Hans Jorgensen, videographer for</p> <p>16 Veritext. The court reporter is Karen Geddes also</p> <p>17 with Veritext.</p> <p>18 Would Counsel please introduce themselves.</p> <p>19 MR. SAYLER: Scott Saylor, Shook Hardy &amp;</p> <p>20 Bacon, representing the Pfizer Defendants.</p> <p>21 MR. GUNTER: Vince Gunter, Shook Hardy &amp;</p> <p>22 Bacon, for the Pfizer Defendants.</p> <p>23 MR. BONDADA: Vijay Bondada, Pfizer Legal.</p> <p>24 MR. FINKELSTEIN: Andrew Finkelstein,</p> <p>25 Finkelstein &amp; Partners, product liability</p>

<p>13</p> <p>1 THE WITNESS: I didn't hire anyone.</p> <p>2 MR. SAYLER: Objection, form.</p> <p>3 THE WITNESS: They hired --</p> <p>4 MR. SAYLER: Misstates the facts.</p> <p>5 THE WITNESS: Thank you.</p> <p>6 BY MR. LANIER:</p> <p>7 Q Well, "hired out" may be a Texas phrase,</p> <p>8 so that may not be a good one.</p> <p>9 A That's probably true.</p> <p>10 Q They hired you.</p> <p>11 A That's true.</p> <p>12 Q The drug company hired you to help them in</p> <p>13 this Neurontin lawsuit?</p> <p>14 A Right.</p> <p>15 Q That's since you left the FDA in '02?</p> <p>16 A That's correct.</p> <p>17 (McCormick Deposition Exhibit Numbers 2</p> <p>18 through 5 were marked for identification.)</p> <p>19 BY MR. LANIER:</p> <p>20 Q I'm going to hand you a document marked</p> <p>21 Exhibit 2. Did you sign that affidavit that I've</p> <p>22 handed you?</p> <p>23 A Yes.</p> <p>24 Q You signed it in September of '07; is that</p> <p>25 right?</p>	<p>15</p> <p>1 Q All right. Then you leave the FDA in '02,</p> <p>2 right?</p> <p>3 A Uh-huh.</p> <p>4 Q Then you get hired by the drug company on</p> <p>5 Neurontin to help them in the lawsuit, right?</p> <p>6 A Uh-huh.</p> <p>7 Q Is that a yes?</p> <p>8 A Yes.</p> <p>9 Q Then after you're hired by the drug</p> <p>10 company, you come back and say: I never suggested</p> <p>11 that Neurontin causes or increases the risk of</p> <p>12 depression or suicide behavior, right?</p> <p>13 A That's true. Uh-huh.</p> <p>14 (McCormick's Deposition Exhibit Nos. 3</p> <p>15 and 3-A were marked for identification.)</p> <p>16 Q And then four months after you did that</p> <p>17 affidavit, the FDA comes out -- I'll give you</p> <p>18 Exhibit No. 3-A -- FDA comes out and says that</p> <p>19 patients receiving gabapentin or Neurontin and other</p> <p>20 antiepileptic drugs had approximately twice the risk</p> <p>21 of suicide behavior or ideation compared to patients</p> <p>22 receiving placebo --</p> <p>23 THE WITNESS: Uh-huh.</p> <p>24 Q -- didn't they?</p> <p>25 MR. SAYLER: Objection, misstates the</p>
<p>14</p> <p>1 A Let me see the date.</p> <p>2 Yes, I did.</p> <p>3 Q If you will, look at page 6, second line</p> <p>4 from the bottom.</p> <p>5 A First I have to get there. Okay. What</p> <p>6 page?</p> <p>7 Q Six, second line from the bottom.</p> <p>8 Do you see where it says, "In presenting</p> <p>9 the data"?</p> <p>10 A Uh-huh. Yes.</p> <p>11 Q All right. Let's put this into a time</p> <p>12 frame because we've digressed with some other</p> <p>13 challenging questions.</p> <p>14 You wrote the first document where you</p> <p>15 said -- Exhibit 1, where you said that "--</p> <p>16 depression, while it may not be an infrequent</p> <p>17 occurrence in the epileptic population, may become</p> <p>18 worse and require intervention or lead to suicide</p> <p>19 --."</p> <p>20 You labeled that one of the "less common</p> <p>21 but more serious events that may limit the drug's</p> <p>22 widespread usefulness," right?</p> <p>23 A Uh-huh.</p> <p>24 Q Is that a yes answer?</p> <p>25 A That's true, yes.</p>	<p>16</p> <p>1 facts.</p> <p>2 THE WITNESS: I think that's not what it</p> <p>3 -- thank you. That's really not what it says here.</p> <p>4 MR. LANIER: Ma'am, I read it word for</p> <p>5 word.</p> <p>6 MR. SAYLER: Let her finish, please.</p> <p>7 THE WITNESS: No, you did not read it word</p> <p>8 for word, because there's no reference specifically</p> <p>9 to Neurontin in here and I think it's -- if I can</p> <p>10 read it for a second, if you give me a second to --</p> <p>11 to reread this, I don't believe that any drug is</p> <p>12 particularly -- is specifically implicated.</p> <p>13 BY MR. LANIER:</p> <p>14 Q Well, ma'am, I'd suggest if you're going</p> <p>15 to take a second to read it, you go to page 4 of 4</p> <p>16 first.</p> <p>17 A Well, I'll start from the beginning, if</p> <p>18 you don't mind.</p> <p>19 Q Okay. Ma'am, have you not seen this</p> <p>20 document before?</p> <p>21 A Yes, I've seen it before, but I'd like to</p> <p>22 reread it.</p> <p>23 Q Because I'm under a time deadline, I'd</p> <p>24 like to give you some direction on what specifically</p> <p>25 you need to be looking for, because I think I can</p>

<p>21</p> <p>1 BY MR. LANIER:</p> <p>2 Q Ma'am, you accused me of oversimplifying</p> <p>3 it. I'm not trying to oversimplify anything. I</p> <p>4 think all I'm doing is reading. Would you tell me</p> <p>5 if I'm reading correctly, please?</p> <p>6 Let me read it to you: In the FDA's</p> <p>7 analysis, patients receiving antiepileptic drugs --</p> <p>8 have I read correctly so far?</p> <p>9 A (Nodding head.)</p> <p>10 Q Is that a yes answer?</p> <p>11 A Yes.</p> <p>12 Q And you --</p> <p>13 A It's not -- I'm sorry. Excuse me for</p> <p>14 just a second. It's not how you're reading this.</p> <p>15 It's what you're -- there's more below the surface</p> <p>16 than what you're stating, that's the problem. You</p> <p>17 know, we can all read this. We can all sit down and</p> <p>18 have a dramatic reading of this, but it's the</p> <p>19 content that's important.</p> <p>20 MR. LANIER: Objection, nonresponsive.</p> <p>21 BY MR. LANIER:</p> <p>22 Q Ma'am, the way the mechanics of this</p> <p>23 works, if this frees you up some to answer my</p> <p>24 questions, is I have four and a half hours to</p> <p>25 question you. This gentleman that represents the</p>	<p>23</p> <p>1 Q Okay. So you would agree today that a</p> <p>2 less common but more serious event that may limit</p> <p>3 Neurontin's widespread usefulness is depression</p> <p>4 which may become worse and require intervention or</p> <p>5 lead to suicide? You agree with that today; is that</p> <p>6 right?</p> <p>7 MR. SAYLER: You're asking if she agrees</p> <p>8 that she said that back in 1992?</p> <p>9 MR. LANIER: No. That's still her</p> <p>10 position today, isn't it?</p> <p>11 MR. SAYLER: Explain your position.</p> <p>12 MR. LANIER: No.</p> <p>13 BY MR. LANIER:</p> <p>14 Q Answer my question: Is it still your</p> <p>15 position today, ma'am, that a less common but more</p> <p>16 serious event that may limit Neurontin's widespread</p> <p>17 usefulness is depression which may become worse and</p> <p>18 require intervention or lead to suicide? Do you</p> <p>19 still agree with that today? Yes or no.</p> <p>20 A Perhaps not the way it was stated, because</p> <p>21 what -- what isn't stated here is -- this was a</p> <p>22 period of time before the drug was marketed, and --</p> <p>23 and we didn't know how -- whether or not some of</p> <p>24 these events that were seen in the clinical trial</p> <p>25 database would play out. And I think that, you</p>
<p>22</p> <p>1 drug company has two and a half hours. He's going</p> <p>2 to get to ask you all the things you want to put</p> <p>3 forward, the position you're paid to put forward</p> <p>4 here today.</p> <p>5 MR. SAYLER: Objection, argumentative.</p> <p>6 MR. LANIER: I'm just asking you -- I'm</p> <p>7 just asking you my questions.</p> <p>8 This whole thing is just a statement, it</p> <p>9 can't be played to the jury. You don't have to</p> <p>10 object. I'm just trying to help you understand, you</p> <p>11 don't need to add these little things. He's going</p> <p>12 to get to ask you all of that. Okay?</p> <p>13 THE WITNESS: For the record, I'm being</p> <p>14 paid to give my opinion, not someone else's.</p> <p>15 MR. LANIER: Yeah. I strongly suspect if</p> <p>16 your opinion today is what your opinion had been</p> <p>17 when you originally wrote your report in '92, you</p> <p>18 wouldn't be here.</p> <p>19 MR. SAYLER: Argumentative.</p> <p>20 THE WITNESS: Well, quite frankly, there's</p> <p>21 no difference.</p> <p>22 BY MR. LANIER:</p> <p>23 Q Oh, good. So you agree today with what</p> <p>24 you said in 1992; is that correct?</p> <p>25 A Yes.</p>	<p>24</p> <p>1 know, with due diligence in reviewing this material,</p> <p>2 there were certain events that were of concern:</p> <p>3 Cancer was one of them, status epilepticus was</p> <p>4 another, depression was a third, and these were</p> <p>5 concerns that were present at the time. And when</p> <p>6 the drug was approved, just as when any drug is</p> <p>7 approved, when events are identified, they continue</p> <p>8 to be followed in the post-marketing period, and</p> <p>9 they were.</p> <p>10 So does that mean that we forget that</p> <p>11 something occurred in the original database when we</p> <p>12 first approved it? No. So I think that my feelings</p> <p>13 at the time, perhaps I -- my predictions were wrong,</p> <p>14 but I think this was a valid concern at the time.</p> <p>15 MR. LANIER: Objection, nonresponsive.</p> <p>16 Can we scroll back and let me find what</p> <p>17 she said before this?</p> <p>18 Keep going. Keep going. Okay. No.</p> <p>19 Right there. I'm going to go down now. Can I do</p> <p>20 this just by page down? Sorry.</p> <p>21 BY MR. LANIER:</p> <p>22 Q Ma'am, I was asking you about your opinion</p> <p>23 and you said there is no difference -- that's a</p> <p>24 quote of you -- no difference between your opinion</p> <p>25 in 1992 when you wrote Exhibit 1, and today,</p>

<p>37</p> <p>1 A Yes.</p> <p>2 Q You weren't part of the post-marketing</p> <p>3 division, were you?</p> <p>4 A No.</p> <p>5 Q The post-marketing division is the</p> <p>6 division in the FDA that monitors drugs after</p> <p>7 they've been approved, right?</p> <p>8 A Correct.</p> <p>9 Q You were in the part that just -- that</p> <p>10 worked up the approval of the drug?</p> <p>11 A Uh-huh.</p> <p>12 Q Is that a yes?</p> <p>13 A Yes, it is.</p> <p>14 Q You're not a neuropsychiatrist, true?</p> <p>15 A That's true.</p> <p>16 Q You're not an epidemiologist?</p> <p>17 A That's true.</p> <p>18 Q Epidemiologists are those numbers doctors</p> <p>19 who figure out percentages and associations based</p> <p>20 on -- on whether a study shows adequate power and</p> <p>21 things like that, right?</p> <p>22 A Well, I don't think I would characterize</p> <p>23 it quite like that, but if that's how you understand</p> <p>24 it, that's fine.</p> <p>25 Q Well, that's probably the way it's been</p>	<p>39</p> <p>1 A I hope so.</p> <p>2 Q Okay. So how much are they paying you to</p> <p>3 testify?</p> <p>4 A Actually, we haven't discussed that.</p> <p>5 Q You hadn't sent them a bill yet?</p> <p>6 A Not for this, because we haven't finished.</p> <p>7 Q All right. You tell them it was grueling,</p> <p>8 okay, and make them pay you.</p> <p>9 How much are they paying you in general to</p> <p>10 work on this case?</p> <p>11 A My usual consulting fee.</p> <p>12 Q And what is that?</p> <p>13 A \$500 an hour.</p> <p>14 Q And do you have a clue how much time</p> <p>15 you've spent so far?</p> <p>16 A I have -- you've actually brought the</p> <p>17 records that you have subpoenaed, so you have those</p> <p>18 at your access. I don't -- I can't tell you right</p> <p>19 now how many hours I've spent in the past few days.</p> <p>20 It's been a few hours yesterday, six hours</p> <p>21 yesterday, roughly, and whatever time we spend</p> <p>22 today.</p> <p>23 MR. LANIER: All right. Why don't we take</p> <p>24 a break for a minute, and let me have the documents</p> <p>25 that we need, and I'll look at those and then we'll</p>
<p>38</p> <p>1 presented to the jury. The jury will hear from</p> <p>2 epidemiologists and the jury is going to hear them</p> <p>3 talking about the power of studies and associations</p> <p>4 and 95 percent degree of confidence intervals and a</p> <p>5 doubling of the risk and -- and rate ratios; those</p> <p>6 are epidemiology terms, by in large, fair?</p> <p>7 A They are statistical terms, and yes,</p> <p>8 epidemiologists use those terms.</p> <p>9 Q All right. You're not an epidemiologist?</p> <p>10 A I am not an epidemiologist.</p> <p>11 Q How much is Pfizer paying you to testify</p> <p>12 in this case?</p> <p>13 MR. SAYLER: Objection.</p> <p>14 MR. LANIER: Why?</p> <p>15 MR. SAYLER: Paying her for her time.</p> <p>16 MR. LANIER: Time testifying, right?</p> <p>17 MR. SAYLER: Time doing whatever she's</p> <p>18 doing.</p> <p>19 BY MR. LANIER:</p> <p>20 Q They don't pay you to eat breakfast, do</p> <p>21 they?</p> <p>22 A No, they don't.</p> <p>23 Q Do they pay you to sleep?</p> <p>24 A No, they don't.</p> <p>25 Q Do they pay you to testify?</p>	<p>40</p> <p>1 start back up.</p> <p>2 THE VIDEOGRAPHER: Off the record</p> <p>3 9:40 a.m.</p> <p>4 (Recess 9:40 a.m. to 9:51 a.m.)</p> <p>5 THE VIDEOGRAPHER: On the record 9:51 a.m.</p> <p>6 BY MR. LANIER:</p> <p>7 Q Ma'am, I got a chance to look at your</p> <p>8 bills. Looks to me like as of September 14th of '07</p> <p>9 or so, you billed somewhere around, oh, \$17,000 or</p> <p>10 so, maybe a little more. Does that seem about</p> <p>11 right?</p> <p>12 A I -- those are the documents, so -- I</p> <p>13 haven't added it up.</p> <p>14 Q Well, why don't we mark them as Exhibit 10</p> <p>15 and I'll ask you, is that an accurate reflection of</p> <p>16 all of the time spent and money you've made on this</p> <p>17 case, through the time period covered by that --</p> <p>18 those invoices?</p> <p>19 (McCormick Deposition Exhibit Number 10</p> <p>20 was marked for identification.)</p> <p>21 A Some of this was reimbursed travel</p> <p>22 expenses.</p> <p>23 BY MR. LANIER:</p> <p>24 Q Okay. But you've got your time and your</p> <p>25 money there, don't you?</p>

<p style="text-align: right;">81</p> <p>1 Q And not only did time pass but --</p> <p>2 A And exposure passed.</p> <p>3 Q And your position, your -- your job</p> <p>4 position changed --</p> <p>5 A Yes.</p> <p>6 Q -- since then. For example, back when you</p> <p>7 wrote this in '92 for the FDA, you didn't have</p> <p>8 lawyers looking over your shoulder editing your</p> <p>9 drafts, did you?</p> <p>10 A That's true.</p> <p>11 Q You didn't meet with lawyers before you</p> <p>12 wrote this, did you?</p> <p>13 A No.</p> <p>14 Q You weren't paid by lawyers before you</p> <p>15 wrote this, were you?</p> <p>16 A No.</p> <p>17 Q Lawyers did not give you the documents to</p> <p>18 review before you wrote Exhibit 1, true?</p> <p>19 A That's true. I think what you are also</p> <p>20 doing, though, is taking this document as a sole --</p> <p>21 the sole document that I wrote and you aren't</p> <p>22 reflecting that time has passed, and I did write</p> <p>23 subsequent documents that -- you know, you're taking</p> <p>24 something out of context, so I just would like to</p> <p>25 say that, you know, you're trying to highlight</p>	<p style="text-align: right;">83</p> <p>1 right?</p> <p>2 A This is the only affidavit that I'm aware</p> <p>3 of that I have ever written.</p> <p>4 Q But you have drafts of it? You didn't</p> <p>5 write it first draft, did you?</p> <p>6 A No.</p> <p>7 Q Did you even write the first draft, or did</p> <p>8 you consult with lawyers and have them prepare it?</p> <p>9 A We talked at length and they wrote -- they</p> <p>10 took notes and they prepared the first draft.</p> <p>11 Q So you didn't even prepare the first draft</p> <p>12 of the affidavit as far as dictating it or sitting</p> <p>13 down and typing it, you just had a conversation and</p> <p>14 the lawyers prepared it; is that fair to say?</p> <p>15 A That is correct.</p> <p>16 Q If I wanted to see the computer that had</p> <p>17 the first draft on it, I would have to go to the law</p> <p>18 firm; I wouldn't go to your office, right?</p> <p>19 A That's correct.</p> <p>20 Q And it's the lawyers that's -- in essence,</p> <p>21 gave you the documents they wanted you to review</p> <p>22 before you had those meetings, didn't they?</p> <p>23 A Well, I have to say that I started the</p> <p>24 process.</p> <p>25 Q That's fair. That's fair. But when you</p>
<p style="text-align: right;">82</p> <p>1 something that probably -- I understand why, because</p> <p>2 you have a law case -- a lawsuit to win, but I think</p> <p>3 that you really are taking it out of context.</p> <p>4 MR. LANIER: Objection, nonresponsive.</p> <p>5 BY MR. LANIER:</p> <p>6 Q You haven't met or seen the video of the</p> <p>7 Widow Smith, have you --</p> <p>8 A I don't know who that is.</p> <p>9 Q -- or her three daughters?</p> <p>10 A No. I don't know who that is.</p> <p>11 Q You don't know the story behind her</p> <p>12 husband's suicide?</p> <p>13 A No.</p> <p>14 Q Okay. They are my clients and I do take</p> <p>15 that very seriously.</p> <p>16 A I'm sure you do.</p> <p>17 Q Before you gave your affidavit and started</p> <p>18 offering your opinions in this case, you moved from</p> <p>19 the FDA and started being paid \$500 an hour by the</p> <p>20 drug company, right?</p> <p>21 A I'm sorry. I -- would you please --</p> <p>22 Q Before you started writing affidavits and</p> <p>23 testifying in this case, one of the changes that</p> <p>24 happened is lawyers stepped in and started paying</p> <p>25 you \$500 an hour on behalf of the drug company,</p>	<p style="text-align: right;">84</p> <p>1 started the process --</p> <p>2 A They reviewed what was in the record.</p> <p>3 Q Yeah. They -- they came to you probably</p> <p>4 not because you are a neuropsychologist.</p> <p>5 A I'm not a neuropsychologist.</p> <p>6 Q Right. They came to you because you had</p> <p>7 written some things, quite frankly, that hurt them</p> <p>8 in this case; did you know that?</p> <p>9 MR. SAYLER: Objection, misstates the</p> <p>10 facts.</p> <p>11 THE WITNESS: No, I don't think so.</p> <p>12 MR. LANIER: All right.</p> <p>13 THE WITNESS: I don't think so, and I</p> <p>14 don't know what somebody else's motives are, so --</p> <p>15 MR. LANIER: Did they --</p> <p>16 THE WITNESS: -- I don't want to</p> <p>17 speculate.</p> <p>18 BY MR. LANIER:</p> <p>19 Q All right. Did you go out and</p> <p>20 aggressively get all of your own documents, or did</p> <p>21 the documents that I'm going to have in the box</p> <p>22 marked as the exhibit in this case all come from the</p> <p>23 lawyers?</p> <p>24 A Some of them, actually, I downloaded off</p> <p>25 the FDA's web site and printed myself.</p>

<p>125</p> <p>1 see in the first paragraph under the heading</p> <p>2 "Considerations for Physicians and other Healthcare</p> <p>3 Professionals," data from 199 placebo-controlled</p> <p>4 clinical studies covering 11 different antiepileptic</p> <p>5 drugs were reviewed and analyzed for reports of</p> <p>6 suicidal behavior -- paren -- completed suicides,</p> <p>7 suicide attempts, and preparatory acts and suicidal</p> <p>8 ideation.</p> <p>9 Did I read that correctly?</p> <p>10 A Yes.</p> <p>11 Q Now, looking at the categories of</p> <p>12 information in the June 2006 submission, first,</p> <p>13 completed suicide, what code or category would that</p> <p>14 be?</p> <p>15 A Code one.</p> <p>16 Q And how many completed suicides were there</p> <p>17 in the gabapentin patient population?</p> <p>18 A In the controlled database, zero.</p> <p>19 Q And how many were there in the placebo</p> <p>20 population?</p> <p>21 A Zero.</p> <p>22 Q Next is suicide attempts; which code would</p> <p>23 that be?</p> <p>24 A Code two.</p> <p>25 Q And how many gabapentin cases were there?</p>	<p>127</p> <p>1 data is pooled for all 11 antiepileptic drugs, we</p> <p>2 have a -- a incidence of 0.43 percent in the pooled</p> <p>3 drug population versus an incidence of 0.22 percent</p> <p>4 in the placebo population.</p> <p>5 Do you see that --</p> <p>6 A Yes, I do.</p> <p>7 Q -- in the FDA's alert?</p> <p>8 A Yes, I do.</p> <p>9 Q Whereas, if we look at the data in the</p> <p>10 gabapentin-only population and we add up the</p> <p>11 percentages in codes one, two, three and five, what</p> <p>12 are the percentages in gabapentin versus placebo?</p> <p>13 A Sorry. So one, two, three, four and five?</p> <p>14 Q One, two, three and five.</p> <p>15 A One, two, three and five. Well, it's</p> <p>16 still two -- .037 -- .039 percent, because there's a</p> <p>17 zero in the other categories.</p> <p>18 MR. FINKELSTEIN: I just want to object to</p> <p>19 this whole line of questioning and set forth that at</p> <p>20 no point in time has Dr. McCormick ever been put</p> <p>21 forth as an expert and it seems that you are seeking</p> <p>22 to elicit expert testimony. You can go forward with</p> <p>23 your line of questioning. I'm just reserving my</p> <p>24 right to make the appropriate application related to</p> <p>25 it.</p>
<p>126</p> <p>1 A Zero.</p> <p>2 Q Next is preparatory acts; which code would</p> <p>3 that be?</p> <p>4 A Code three.</p> <p>5 Q How many preparatory acts toward imminent</p> <p>6 suicide behavior were there in the gabapentin</p> <p>7 population?</p> <p>8 A Zero.</p> <p>9 Q And then finally is suicidal ideation;</p> <p>10 which code would that be?</p> <p>11 A Code five.</p> <p>12 Q And how many cases of suicidal ideation</p> <p>13 were there in the gabapentin population?</p> <p>14 A There were two.</p> <p>15 Q And how many -- and what percentage did</p> <p>16 that add up to?</p> <p>17 A .039 percent.</p> <p>18 Q .039 percent?</p> <p>19 A Uh-huh.</p> <p>20 Q And how many cases of suicidal ideation</p> <p>21 were there in the placebo population?</p> <p>22 A There was one.</p> <p>23 Q And what percentage did that add up to?</p> <p>24 A .037.</p> <p>25 Q Now, the FDA Alert states that when this</p>	<p>128</p> <p>1 BY MR. SAYLER:</p> <p>2 Q You testified earlier that the FDA Alert</p> <p>3 does not change as you sit here today the fact that</p> <p>4 you have never concluded that Neurontin increases</p> <p>5 the risk of or causes suicide-related behavior; is</p> <p>6 that your testimony?</p> <p>7 MR. LANIER: Objection, form.</p> <p>8 THE WITNESS: That's correct.</p> <p>9 BY MR. SAYLER:</p> <p>10 Q And can you --</p> <p>11 A That's correct. I mean, these data are</p> <p>12 largely --</p> <p>13 Q Let me ask a question.</p> <p>14 A Okay.</p> <p>15 Q Can you -- can you explain why your</p> <p>16 conclusion has not changed as you sit here today</p> <p>17 notwithstanding the FDA Alert?</p> <p>18 MR. FINKELSTEIN: Objection.</p> <p>19 THE WITNESS: Because the -- there was no</p> <p>20 signal in the controlled database in both NDAs.</p> <p>21 This is simply -- this is basically the same data.</p> <p>22 BY MR. SAYLER:</p> <p>23 Q And when you say "both NDAs," you are</p> <p>24 talking about --</p> <p>25 A Both, the NDA and --</p>